

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

PEPTIDE BETA-STRAND MIMICS BASED ON  
PYRIDINONES, PYRAZINONES,  
PYRIDAZINONES, AND TRIAZINONES

Attorney Docket Number::

02307V-142800US

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

Total Drawing Sheets::

3

Small Entity?::

Yes

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

National Institutes of Health

Contract or Grant Numbers One::

GM-30759

Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type: Inventor

Primary Citizenship Country: US

Status: Full Capacity

Given Name: Paul

Middle Name: A.

Family Name: Bartlett

Name Suffix:

City of Residence: Oakland

State or Province of Residence: CA

Country of Residence: US

Street of Mailing Address: 6435 Swainland Road

City of Mailing Address: Oakland

State or Province of mailing address: CA

Country of mailing address:

Postal or Zip Code of mailing address: 94611

Applicant Authority Type: Inventor

Primary Citizenship Country: US

Status: Full Capacity

Given Name: Ming

Middle Name: Chen

Family Name: Hammond

Name Suffix:

City of Residence: Alameda

State or Province of Residence: CA

Country of Residence: US

Street of Mailing Address: 2101 Shoreline Drive, Unit 480

City of Mailing Address: Alameda

State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94501

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

### **Foreign Priority Information**

Country:: Application number:: Filing Date::

### **Assignee Information**

Assignee Name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::